



FEE \$ 25.00  
ON OR BEFORE  
DATE DUE 05/31/95  
REPORT YEAR 1995

STATE OF COLORADO  
BIENNIAL REPORT OF  
A CORPORATION OR LIMITED LIABILITY COMPANY

RECEIVED  
DEPARTMENT OF STATE

007

APR 03 1995

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THIS FORM MUST BE TYPED

\$25.00

MAILING DATE 03/01/95

INFORMATION BELOW IS ON FILE IN THIS OFFICE - DO NOT CHANGE PRE-PRINTED INFORMATION

CORPORATE NAME REGISTERED AGENT, REGISTERED OFFICE, CITY, STATE & ZIP
871609696 ON STATE/COUNTRY OF INC CO
BIESENDORFER, WILLIAM J YACHT CLUB COMMUNITY ASSOCIATION, IN C. (THE)
8670 WOLFF CT, STE <sup>260</sup> <del>150</del> WESTMINSTER CO 80030

FOR OFFICE USE ONLY

951043313 C \$25.00  
SECRETARY OF STATE  
04-05-95 08:28

*Dg*

FIRST REPORT OR CORRECTIONS IN THIS COLUMN

Return completed reports to:  
Department of State  
Corporate Report Section  
1560 Broadway, Suite 200  
Denver, CO 80202

CHANGE OF  
R.O.R.A.

TYPE NEW AGENT NAME

SIGNATURE OF NEW REGISTERED AGENT

MUST HAVE A STREET ADDRESS

8670 WOLFF CT., STE. 260

CITY

STATE  
CO

ZIP

OFFICERS NAME AND ADDRESS	TITLE
ERICKSON JENNIFER 6890 XAVIER CR SUITE 3 WESTMINSTER CO 80030	PR
POWERS DEMETRIOS 6890 XAVIER CR SUITE 2 WESTMINSTER CO 80030	VP
BEDNASEK VIRGINIA 4882 W 68TH AVE SUITE 1 WESTMINSTER CO 80030	TR

WILLEY, JOHN  
5151 WARD RD. #3

WHEAT RIDGE, CO 80033

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DIRECTORS OR LIMITED LIABILITY COMPANY MANAGERS
ERICKSON JENNIFER 6890 XAVIER CR SUITE 3 WESTMINSTER CO 80030
POWERS, DEMETRIOS 6890 XAVIER CTR. #2 WESTMINSTER, CO 80030 WILLEY, JOHN 5151 WARD RD. #3 WHEAT RIDGE, CO 80033

Address of Principal Place of Business

Street 8670 WOLFF CT., STE. 260

City WESTMINSTER State CO Zip 80030

SIGNATURE

Under penalties of perjury and as an authorized officer, I declare that this biennial report and, if applicable, the statement of change of registered office and/or agent has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete.

BY [Signature] Authorized Agent

TITLE Secy DATE 3/20 1995

☒ NOTE: DO NOT USE THIS BOX IF THIS IS YOUR FIRST REPORT!!! SEE INSTRUCTIONS ON REVERSE. IF THERE ARE NO CHANGES SINCE YOUR LAST REPORT, MARK THIS BOX, SIGN ABOVE AND RETURN WITH THE FEE AND BY THE DATE DUE INDICATED ABOVE(UPPER LEFT HAND CORNER). IF YOU ARE FILING AFTER THE DATE DUE ABOVE, CONTACT THIS OFFICE FOR THE PROPER FEE. (303) 894-2251

SEE INSTRUCTIONS ON BACK